Workforce Development Plan



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Purpose and Introduction

Training and development of the workforce is one part of a comprehensive strategy toward agency quality improvement. Fundamental to this work is identifying gaps in knowledge, skills, and abilities through the assessment of both organizational and individual needs, and addressing those gaps through targeted training and development opportunities.

This document provides a comprehensive workforce development plan for Reno County Health Department. The plan lists workforce priority areas for the agency as identified by the Leadership Team at Reno County Health Department and from an employee performance management survey. This document addresses required internal trainings and their implementation schedule, and a process to assess and identify the core competency level of staff, and a plan to increase the core competency level of Reno County Health Department over the next five years. The document also serves to address the documentation requirement for the PHAB Accreditation Standards 8.2.1A Maintain, implement and assess the health department workforce development plan that addresses the training needs of the staff and the development of core competencies and 8.2.2A Provide leadership and management development activities.

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Agency Profile

Mission and Vision

The purpose of a Mission and Vision is to illustrate an agency's intentions, describe how it may look in the future and how it will achieve its goals. As part of its 2016 Strategic Planning Process, both the mission and vision for the agency were modified to better emphasize the agency's purpose and how it will achieve that purpose.

Mission – To provide leadership to improve the health of Reno County Residents

Vision – Reno County Residents are living long and healthy lives.

Location and Population Served

The Reno County Health Department is a local public health agency whose jurisdiction covers Reno County, KS, population of the jurisdiction is 63,794 making it the 3rd largest county in the state based upon population and the largest in the state based on geographical area.

Governance

Formed by joint resolution of the Reno County Commission and the City of Hutchinson in January 1973 Public Health was born in Reno County. Initially housed at Convention Hall and putting the roots of public health down in Reno County. Public Health services were growing and in 1981 Reno County assumed responsibility for the Health Department and made a commitment to all residents of Reno County to ensure access to care, environmental health, and to provide healthy community options as a priority.

The Board is comprised of three county commissioners and a voluntary advisory board meets monthly to assist the Health Officer with Public Health Related Issues. A Health Officer is responsible for the daily operation of the agency. Reno County Health Department employs approximately 50 staff making up clinical and non-clinical services.

Organizational Structure

Eight departments make up Reno County Health Department and are divided among two divisions 1. Community Health which includes: Health Promotion and Education, Environmental Health, WIC, Preparedness and Data and Quality Services. 2. Clinical Services includes: Basic Health Services, Maternal Child/Family Planning, and Older Adult Services. Each Division is overseen by an asst. director who reports to the Health Officer.

Learning Culture

As an agency Reno County Health Department is committed to promoting and maintaining a learning environment. Annually, staff is assessed to determine their educational needs. Department managers are responsible for maintaining their licensure and continuing education opportunities and keeping apprised of educational opportunities that would benefit them professionally as well as be beneficial for the Health Department. Division Directors are responsible for determining opportunities for staff to attend appropriate professional meetings and trainings related to programming efforts. Throughout the year appropriate training opportunities are incorporated into staff meetings.

Funding

Funding for Reno County Health Department as an agency is comprised of mix of Federal, State and Local resources. Within the Health Department budget there is a specific "Education and Training" line item which is utilized to assure continuing educational opportunities are available to staff from dedicated agency resources.

Workforce Policies

Policies related to workforce development and training opportunities are located in both the Reno County Human Resource Personnel Policy Manual and the Health Department Orientation Plan.

Workforce Profile

Introduction

This section provides a description of the Reno County Health Department's current and anticipated future workforce needs. Data contained below provides a picture of the current Reno County Health Department's workforce as of May 1, 2017.

Current Workforce Demographics

Current workforce Demographics	
Categor	# or
Total Number of Employees	53
Number of FTE	43
Gender	
Male	4
Female	49
Race	
Hispanic	3
Asian	O
African American	0
Caucasian	50
Professional Category	
Senior Management	3
Middle Management	8
Registered Nurses	17
Clinic	4
Social Workers	2
Health Educators	3
Sanitarians	3
Information Technology	0
Finance Staff	2
Vision & Hearing	0
Support Staff	8
Midlevel Providers	2
Medical Director	0
Dietitian/Nutritionist	3
Employees < 5 Years from Retirement (Age 60)	
Management	2
Non-Management	6
Retention Rate by Years of Employment	
5 to 9 years	
>10 years	
	<u> </u>

Future Workforce Issues

In reviewing the make-up of the Reno County Health Department workforce the agency anticipates having to address issues related to the following areas:

Retirement -

Within 5 years, all of the finance and support staff will become eligible for retirement.

The health department will be working on succession planning and recruitment for key support staff roles. The agency needs to plan for this to insure a smooth transition when losing a number of support staff employed at the agency for 20 or more years. These individuals are a wealth of knowledge and take care of everyday activities that many of us take for granted. Administration and staff want to be prepared and have a plan so that there won't be a hiccup of supporting our staff so they can continue to provide services to individuals in our community.

Leadership & Succession Planning -

Currently there is not a large number of administration or management staff that will be at or near retirement age. Our director has instilled in us to train staff as if they were going to replace us. He takes this stance so that there will be trained individuals in all departments if someone decides to take a better opportunity elsewhere or something catastrophic happens.

Technology Advancements -

The inclusion of expanded use of technology is essential for public health. A planned approached which maximizes the benefits using technology is essential. This planned approached needs to assure the identification of technology skills needed by employees and the provision of training opportunities where needs are identified. There continues to be a need to assure that staff have the opportunity to be up to date on their technology skills to assure that they are effective in their jobs. The agency has recently implemented an EMR and therefore we have had a need for updated computer programs to ensure data tracking in departments not using the EMR.

Included in the agency's strategic plan is an objective to develop and implement by June 30, 2018 an agency wide technology plan to implement an EMR, enhance technology for data tracking with departments not using EMR, and utilize electronic forms as much as possible.

Infrastructure

On a more macro level related to providing Public Health services within the County, the Reno County Health Department Leadership Team will need to assure that the following areas are dealt with:

Core Competencies –

Our workforce development plan contains a detailed schedule for integrating PH core competencies into the staff and agency. With the changing face of Public Health, it is essential that we continue to educate our staff on public and emergency preparedness core competencies. Core competency training is essential for the success of the public health workforce. Training programs provide the staff with understanding and skill development necessary to perform vital Public health and Emergency Preparedness job duties.

Credentialing of Eligible Staff -

The department will encourage staff members to expand their public health skill set and seek additional training or participate in specific credentialing processes as appropriate. Reno County Health Department staff demonstrates a high level of competence and professional achievement. Credentialing is seen as an opportunity to illustrate competence in staff performance and seek additional funding opportunities.

Performance Management & Quality Improvement -

The department is engaged with using performance management and quality improvement to assure a highly functioning public health entity. Training and education opportunities will be provided to staff. Our goal is that this process will be bottom up and supported by department leadership

Reno County Health Department has dedicated staff and resources towards building a culture which embraces performance management and QI.

In order to achieve an organization proficient in Performance Management and Quality Management training and education will be necessary for all staff.

Workplace Environment

In January 2017 staff completed a performance management self assessment with the Community Engagement Institute. The survey consisted of questions related to the understanding of performance management and quality improvement. It also assessed the effectiveness of management and administration staff. Reno County Health Department anticipates asking all staff to participate in a performance management survey every three years. Results from the survey identified the following areas for the agency and its Leadership Team to address:

Provide an Environment Which Results in a High Level of Employee Satisfaction -

A follow-up employee survey in January 2020 will elicit suggestions for environmental improvement.

Improve Communication within the Agency -

The agency continues to address this employee concern with new resources and strategies. One of our strategic plan objectives is to develop a public relations plan that includes communication with staff in our building and stakeholders and citizens about public health issues.

Improve Visible Leadership regarding Performance Management and our Strategic Plan –

The agency will address performance management misunderstandings and provide all management levels training and a training plan to better understand performance management and quality improvement and how the two work together to accomplish our strategic plan.

In 2015, Reno County Health Department participated in the *Kansas Public Health Workforce Assessment*. The full report was made available by Kansas Public Health Workforce Development Coordinating Council and will be consulted in future tier specific competency training planning. The report is attached as Appendix A.

Competencies & Educational Requirements

Core Competencies for Reno County Health Department Staff

The Reno County Health Department has made a commitment to work towards the adoption of the Core Competencies in the coming five years. The Council of Linkages Core Competencies for Public Health Professionals is the nationally recognized set of standards upon which the workforce development plan would be built. With this we will implement new job descriptions that encompass core competencies by November 30, 2017 and by December 2021 all departments will have adopted the core competencies in their everyday work.

The Council of Linkages Core Competencies for Public Health Professionals is divided into three specific groups or tiers for public health workers. These Core Competencies are designed to serve as a starting point for an organization to understand, assess, identify and meet the training and workforce development needs of an agency. The competencies represent a set of skills identified as desirable for the practice of public health and reflect the characteristics which staff of a public health organization should want to possess as they deliver the Essential Public Health Services.

Core Competency Key Dimensions

- 1. Analytical/Assessment
- 2. Policy Development/Program Planning
- 3. Communication
- 4. Cultural Competency
- 5. Community Dimensions of Practice
- 6. Public Health Sciences
- 7. Financial Planning and Management
- 8. Leadership and Systems Thinking

In addition to the Council of Linkages Core Competencies, Reno County Health Department has also identified a set of competencies specific to emergency preparedness that will be included in this plan. These competencies, known as the Bioterrorism and Emergency Readiness Competencies for all Public Health Workers, will provide a platform for which the agency can provide training, exercises and drills for staff.

Core Preparedness Competencies

- 1. Describe public health's health role in an emergency
- 2. Describe agency chain of command
- 3. Identify and locate agency emergency plan
- 4. Describe and demonstrate one's functional role
- 5. Demonstrate use of communication equipment

- 6. Describe communication roles during emergency response
- 7. Identify limits to one's authority
- 8. Apply creative problem solving skills
- 9. Recognize deviations from the norm

Continuing Education

Multiple public health-related disciplines require continuing education for their ongoing licensing/certification/practice and registration. Licenses held by staff from The Reno County Health Department, and their associated continuing educational requirements, are shown in the chart below. While Reno County Health Department actively supports, encourages, and promotes continuing education, the maintenance of necessary licensure is the sole responsibility of the individual staff member.

Discipline/License	CE Requirements
APRN	30 CNE every 2 years at AP
Registered Sanitarian	3 CEU every 3 years
Health Educator (CHES/MCHES)	75 CECH every 5 years
Registered Nurse	30 CNE every 2 years
Social Worker (LSW, MSW, LISW)	40 CEU every 2 years
Registered Dietician	15 clock hours every 2 years

Training Needs

Introduction

Included within this section are the identified and mandatory training needs of the Reno County Health Department. Mandatory trainings listed here are those which the agency Leadership Team and other governing entities have determined to be important for ongoing review and education by staff.

Core Competency Needs Assessment

As part of this workforce development plan, Reno County Health Department will include strategies to assess the level of competence of staff as they relate to The Core Competencies for Public Health Professionals as adopted by the Council of Linkages. In 2015, Reno County Health Department participated in the Kansas Public Health Workforce Assessment but the information contained in the report has not yet been integrated into any formal workforce development planning. As part of the assessment process staff will be categorized as either a Tier 1, 2, or 3 based upon the following criteria.

Tier 1 – Those staff who are entry level and who carry out the day-to-day tasks of Reno County Health Department and are not in a supervisory or leadership role.

Tier 2 – Those staff that carry out the day-to-day supervision and/or management responsibilities for Reno County Health Department.

Tier 3 — Those staff who are part of the Reno County Health Department senior administrative or leadership team.

For this assessment Reno County Health Department intends to utilize the Competency Assessment Tool for Tier 1, 2, and 3 Public Health Professionals provided through the Public Health Foundation. A plan to complete the assessment and tier trainings is included in the goals, objectives and implementation plan section. As the assessment process is completed and competency areas for training are determined, sections will be added to this workforce development plan annually to reflect what has been completed and what is planned for.

Agency specific training needs

The following training areas represent those identified through the completion of the Performance Management presentation by the Community Engagement Institute at the All staff meeting in April 2017 and through an e-mail questionnaire about specific trainings, what, where, how, and when to provide them. The staff recommended trainings are listed below.

- Performance Management and Quality Improvement
- Communication within the Agency

Division specific training needs

The director will develop a training plan for all staff of the health department addressing PM, QI, and Communication. Each division will be responsible for developing a training plan for their division addressing continuing education needs and other public health education needs for staff. Managers and staff will recommend 2 – 4 trainings for staff throughout the year Asst. directors will help address timing, and scheduling of that training throughout the year.

Mandatory training needs

Included within this section are the trainings which are required by the Reno County Health Department and/or by state or federal mandate. Information and access to these trainings will be provided to staff initially at their orientation and in subsequent years by individual Directors or supervisors.

Training	Who	Frequency
HIPAA	All Staff	Annually
Bloodborne Pathogens	All Staff	Annually
Cultural Competency	All Staff	2018 – every 5 years
County Employee Policies	All Staff	HR Director will review polices 1x a year with Health Department staff.
Brief Tobacco Intervention	All Staff	Orientation – 1 time.
Orientation to Public Health	All Staff	Orientation – 1 time.
NIMS 100, 200, 700, & 800	All Staff	Orientation
Confidentiality	All Staff	2017 – every two years
Diversity, Disparities, and Social	All Staff	2018 – every five years
Emergency Preparedness – Active	All Staff	
Shooter		Annually 2017 - 2020
Emergency Preparedness – Fire Drills	All Staff	Annually/Summer 2017 – 2020
Emergency Preparedness – 800 MHz	MHz Radio	Annually 2017 - 2020
Radio Training	Operators	

Roles and Responsibilities

This section provides information regarding training goals and objectives of Reno County Health Department, as well as resources, roles, and responsibilities related to the implementation of the plan.

Who	Role & Responsibility
Board of Health	Responsible for assuring that a supportive, learning environment is available and maintained within the agency. Ultimately responsible for ensuring those resources are available to implement the workforce development plan.
Health Officer	Responsible to the Board of Health for priority setting. Establishment of goals and objectives and for assigning resources to facilitate a learning environment.
Asst. Directors	Responsible for oversight and updating of workforce development plan and assisting in supporting a learning environment. Assists in searching for and providing training programs and opportunities. Responsible for assuring performance reviews are conducted and documented appropriately. Responsible for creating environment to document completed trainings. Responsible for all staff in their division, mentors, supports and coaches managers and staff to assure that appropriate training resources and support structures are available within their division. Responsible for assuring all their staff complete mandatory trainings.
Managers	Works with staff to develop individualized training plans and mentors and provides support for the accomplishment of the plan.
All Employees	Ultimately responsible for their own learning and development. Work with manager to identify and engage in training and development opportunities that meet their individual as well agency-based needs. Identify opportunities to apply new learning on the job.

Goals, Objectives and Implementation Plan

This section provides information regarding training goals and objectives of the agency, as well as resources, roles, and responsibilities related to the implementation of the plan. In constructing this plan, Reno County Health Department is looking at a five year period to completely implement the trainings and assessment pieces contained within it.

Goal	Objectives	Target Audience	Responsible
Integrate public health core competencies into Reno County Health Department workforce	By September 30, 2017 complete an assessment of core competencies for Tier 3 staff By September 30, 2017 complete an analysis/ranking of core competency assessment scores for Tier 3 staff By December 31, 2017 develop training plan to address low core competency scores for Tier 3 staff By December 31, 2017 provide an overview of public health core	Senior Administration/Leadership Team	Asst Directors
	competencies to all Reno County Health Department staff	All Staff	Reno County Health Department Management Team
	By October 31, 2017 complete an analysis/ranking of core competency scores for Tier 2 staff	Supervisors & Managers	Data & Quality Manager, Asst. Directors
	By January 31, 2018 develop a training plan to address low core competency scores for Tier 2 staff		
	By September 31, 2018 complete an assessment of core competencies for Tier 1 staff		
	By March 31, 2018 complete an analysis/ranking of core competency scores for Tier 1 staff	Direct Service Staff	Data & Quality Manager & Asst. Directors
	By September 30, 2018 develop a training plan to address low core competency scores for Tier 1 staff		

As the assessments are completed, additional goals and strategies may be added to the plan as its implementation moves forward.

Integrate core	By December 31, 2017	Managers	Data & Quality
competencies into Reno	complete a review of the Reno		Manager & Asst.
County Health Department	County Health Department		Directors
Performance Review Tools	Performance Review Tool and		
	identify revisions		
	By September 30, 2017 update Tier	Administrative/Leadership	
	3 staff job descriptions to include	Team	Asst. Directors
	core competencies		
	By October 31, 2017 update Tier	Supervisors & Managers	
	2 staff job descriptions to include		Managers/Asst.
	core competencies		Directors
	De Nevember of costs and data Time		
	By November 31, 2017 update Tier 1 staff job descriptions to include core	Direct Service Staff	Managers/Asst.
	competencies	Direct Service Stair	Directors
	competencies		Directors
Maintain Excellence as a	By May 31, 2017 provide training on	All Staff	
Public Health Agency	Performance Management		Asst. Directors
	By December 31, 2017 complete		
	online Performance Management	All Staff	
	Primer		Data and Quality
			Manager, Asst.
			Directors

Curricula and Training Schedule

Included within this section is a schedule of the current recommended trainings for staff. Additional trainings related to core competencies will be added to this listing as each Tier level assessment is completed and the results analyzed. Subsequently, staff opportunities will be added to the plan as deemed appropriate.

TOPIC	DESCRIPTION	COMPETENCY ADDRESSED	TARGET AUDIENCE	SCHEDULE	RESOURCES
Employee Orientation – Essentials for Success	Overview of Reno County Health Department operations, policies, procedures and functions, Public health responsibilities and history, Quality improvement	PH competencies – 1,2,3,4,5,6,7,8 EP competencies – 1,2,3	All New Staff	Twice per year, May and November	KS Train, Orientation Materials
Quality Improvement	Introduction to QI process and tools	PH competencies – 2,7,8 EP competencies – 8,9	All New Staff, QI Team Members	Within 6 months of orientation, point of membership on QI Team	MPHI – Embracing Quality in Public Health: A Practitioner's QI Primer - online
Performance Management	Introduction to Performance Management Systems and Processes	PH competencies – 1-8 EP competencies – 8,9	All Staff	Bi-Annual	MPHI – Embracing Quality in Public Health: A Practitioner's Guide to Performance Management - online
Core Competency	Introduction to PH Core Competencies	PH competencies – 1-8	All Staff	All Staff Meeting 2018	

Preparedness	Train staff on what they would need to do in a real event	1,4,5,9 PH competencies – 1,2,3,5,6,8	All Staff	All Staff Meeting 2018	Preparedness staff - Power point presentation and materials
Full Scale Emergency Preparednes s Exercise	Full scale exercise to provide hands on experience for preparedness	EP competencies – 1,4,5,9 PH competencies – 1-8	Reno County Staff	Annual	Emergency Preparedness staff - Power point presentation and materials
Point of dispensing training	Power Point presentation to train staff for a real event	PH competencies – 1-8 EP competencies – 1-9	All Staff	Annual	Emergency Preparedness staff - Power point presentation and materials
Full Scale Exercise on Point of Dispensing	Full Scale Exercise to provide hands on training for staff	PH competencies – 1-8 EP competencies – 1-9	All Staff	Every Other Year	Emergency Preparedness staff - Power point presentation and materials

Evaluation and Review of Plan

Review and evaluation of this plan will occur annually and be conducted by the Assistant Directors. The results of this review and evaluation will be shared with the Reno County Health Department Management Team who will make recommendations for plan additions and changes.

Date of Plan Review	Signatures

Plan Authorship

Nick Baldetti – Health Officer

Ivonne Rivera-Newberry – Asst. Director Clinical Services

Megan Gottschalk-Hammersmith – Asst. Director Population Services

Anna Brown – Data & Quality Manager

Laurie Carr - Health Promotion and Education Manager

Darcy Basye – Environmental Health Manager

Karen Hammersmith – Basic Health Services Manager

Grace Cody – Maternal & Child/Family Planning Manager

Heather Peterson – WIC Manager

Tara Ghere – Preparedness Manager

Ruby Slavenburg – Medical Records

Geneva Nisly – Finance Manager



Reno County Health Department

Workforce Assessment Report

Prepared by the Kansas Public Health Workforce
Development Coordinating Council



Funded by the Kansas Health Foundation Public Health Practice Program

Reno County Health Department Workforce Assessment Report 2014-2015

Overview

The Kansas Public Health Workforce Assessment is a large-scale project that is statewide in scope designed to provide:

- An overall competency assessment of public health staff based at the state and local health departments
- A data-driven approach to workforce development in Kansas
- An accurate picture of the Kansas workforce with extensive demographic information which will allow workforce development opportunities to be tailored
- Comparisons of specific workforce segments including rural vs. urban; environmental vs. non-environmental; and small, medium and large health departments
- County-level reports for local health departments and bureau-level reports for the Kansas Department of Health and Environment (KDHE), which are required for accreditation through the Public Health Accreditation Board, and will allow organizations to target their workforce development efforts
- A unique examination of which competencies are perceived to not apply to certain public health positions (e.g. environmental staff not perceiving cultural competence as applying to their job)
- A tool for continuous quality improvement

The assessment is based on the Council on Linkages Core Competencies for Public Health Professionals and assesses the workforce across eight domains—Communication, Cultural Competency, Analytical/Assessment, Policy Development/Program Planning, Community Dimensions of Practice, Public Health Sciences, Financial Planning and Management, and Leadership and Systems Thinking. The workforce was categorized into four tiers—Tier 1—staff who carry out day-to-day tasks; Tier 2—supervisory and/or program management level staff; Tier 3—senior management and leaders of a public health organization; and the newly created Tier A—administrative and facilities support staff.

The assessment was designed by members of the Kansas Public Health Workforce Development Coordinating Council (KPHWDCC) in consultation with other states as well as local health departments in Kansas that had recently successfully completed a workforce assessment.

There were a total of 1,780 respondents and an overall participation rate of 73%, with Kansas Department of Health and Environment staff reaching 83% and local public health department employees reaching 66% (940 respondents out of a total of 1,429). Twenty-seven health departments had a 100% participation rate. Additionally, 49 health departments had a participation rate of 75% or above, 69 health departments had a participation rate of 50% or above, and 96% of health departments had at least one participant.

Table 1. Total Respondents by Tier

Tier	Reno County	South Central Region	Total LHD Respondents
Tier 1	12 (29%)	61 (31%)	377 (40%)
Tier 2	11 (27%)	45 (23%)	172 (18%)
Tier 3	5 (12%)	24 (12%)	113 (12%)
Tier A	13 (32%)	66 (34%)	278 (30%)
Total	41	196	940

The ultimate outcome of the Kansas Public Health Workforce Assessment is a well-trained, better prepared, more effective workforce that is highly satisfied with their work. It will help ensure the current and future public health workforce has the knowledge, skills and abilities to meet the ongoing public health challenges of the 21st century.

Methods

Extensive testing was conducted to ensure representation of the entire Kansas workforce, including geographically and culturally. Promotion of the assessment to all KDHE and local health department staff was critical in gaining a high level of participation. Incentives were offered to encourage participation, which were awarded utilizing a random drawing. In order to protect confidentiality, analyses were only conducted in cases where there were more than five people in a category. In the cases where there were less than six people in a specific category (or for an entire health department), efforts were made to match on the basis of demographics and geographic region. Every effort was made to make the report as specific to the local health department as possible.

For each of the competencies, participants had the choice of one of the following responses:

- Not at all proficient
- Some limited proficiency
- Proficient
- Very proficient
- This does not apply to my job
- I do not understand this question

The responses were grouped during analyses. To determine the area of lowest proficiency for each domain, "not at all proficient" and "some limited proficiency" were grouped. To determine the area of highest proficiency and overall proficiency percentage for each domain, "proficient" and "very proficient" were grouped. "This does not apply to my job" responses were considered a separate category.

For the purposes of this report, the areas of highest and lowest competency for each domain are included in this report. If you would like more details about specific competencies within a domain, raw data may be available, unless there are less than six respondents in a tier. A list of the competencies which were included in the assessment are included with this report as Appendix 1.

Acknowledgements

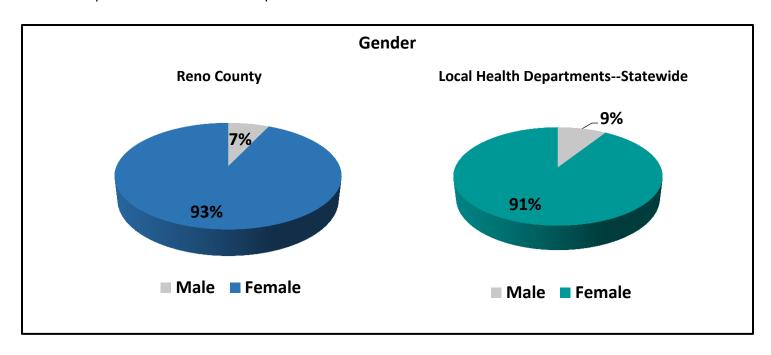
Funding support for the Kansas Public Health Workforce Assessment was provided by the Kansas Health Foundation through the Public Health Practice Program. This report was prepared by the Kansas Public Health Workforce Development Coordinating Council which includes the following member organizations: Kansas Department of Health and Environment, Kansas Health Institute, University of Kansas Master of Public Health Program (KU-MPH), Kansas State University (KSU) Master of Public Health Program, Kansas Health Foundation, Lawrence-Douglas County Health Department, University of Kansas School of Nursing, Reno County Department of Health and Environment, Kansas Association of Local Health Departments, Butler County Health Department, Kansas Environmental Health Association, Reno County Health Department, KUMC--Area Health Education Centers, Wichita State University--Center for Community Support and Research, Wichita State University (WSU) Department of Public Health Sciences, Baker University School of Nursing, and SOCO Consulting.

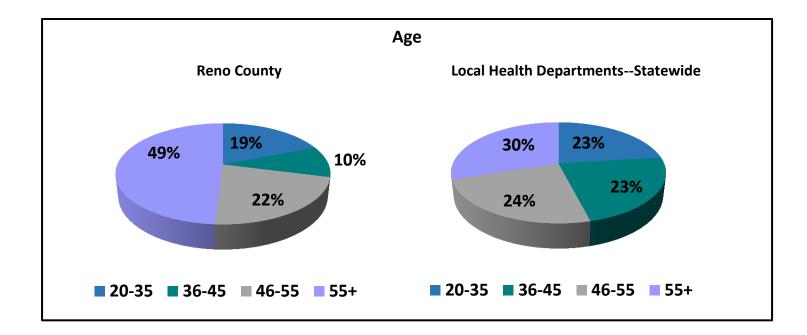
Contact Information

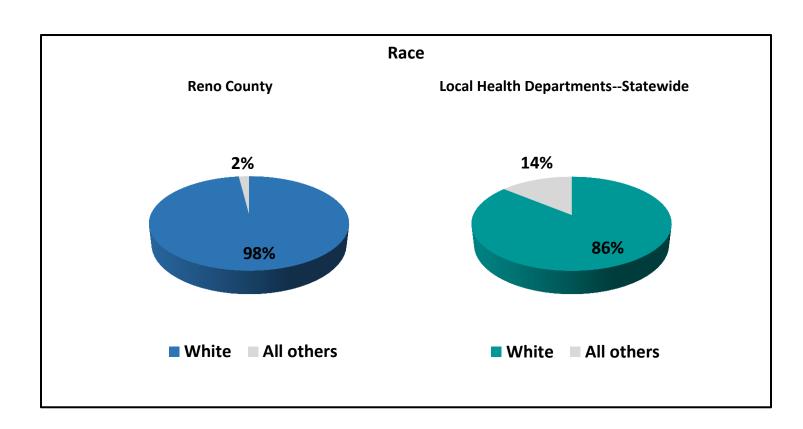
For more information about the Kansas Public Health Workforce Assessment, visit http://www.kdheks.gov/olrh/workforce development.htm. If you have questions, contact Cristi Cain, Public Health Specialist, Kansas Department of Health and Environment, at 785-296-3641 or ccain@kdheks.gov.

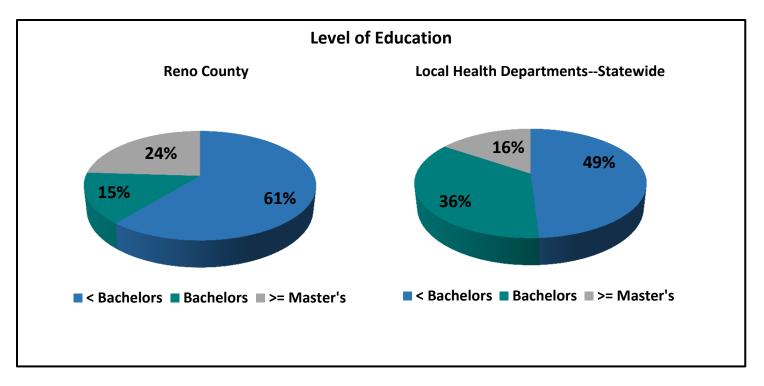
Demographics

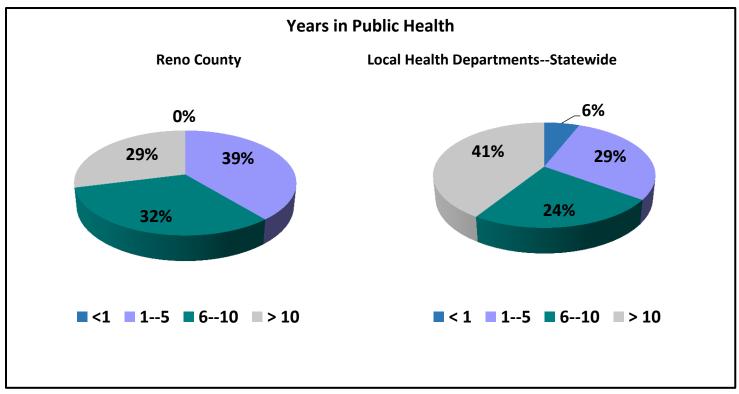
The demographic breakdown for Reno County Department of Health and Environment compared with local health departments in Kansas statewide is as follows:

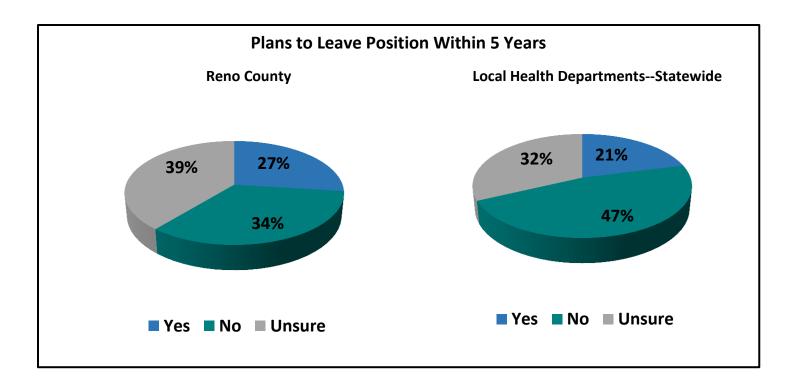




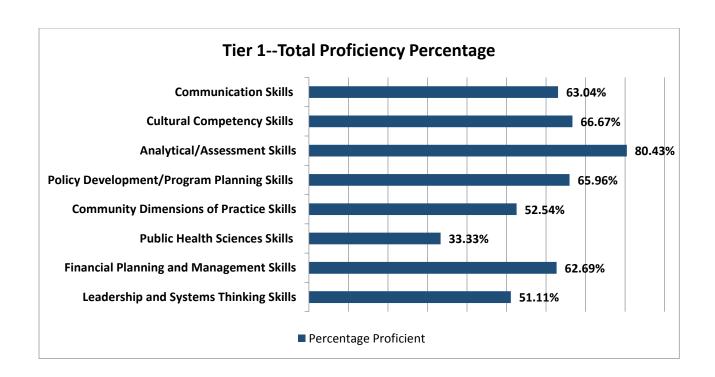


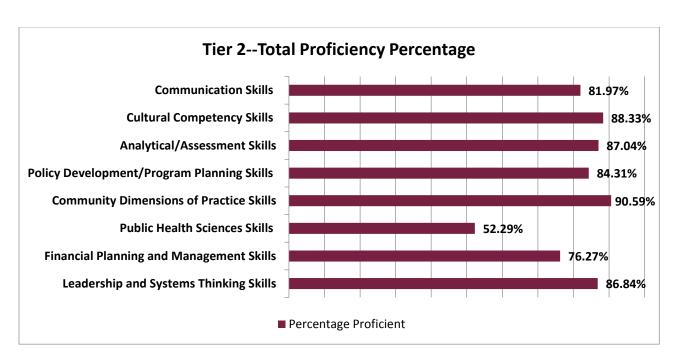


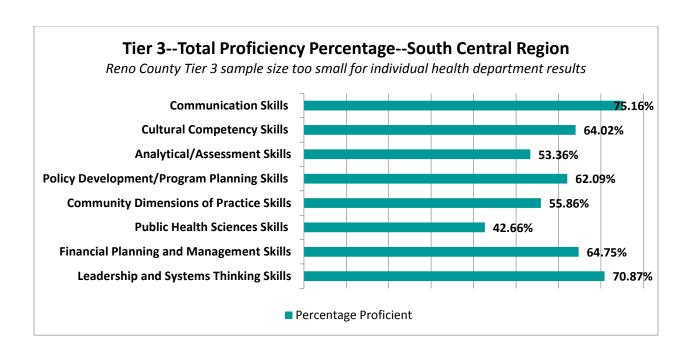


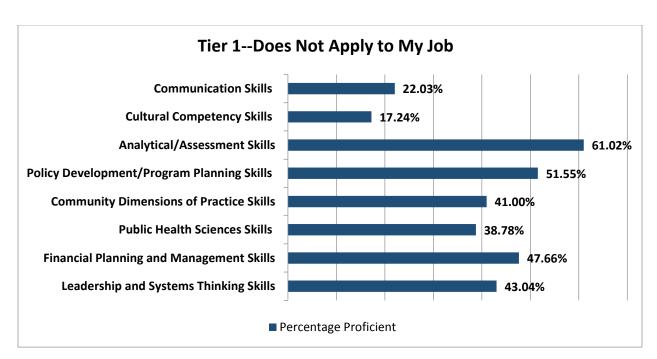


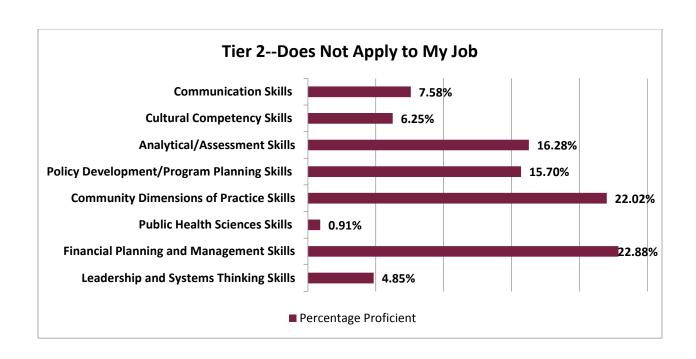
Results from the Kansas Public Health Workforce Assessment

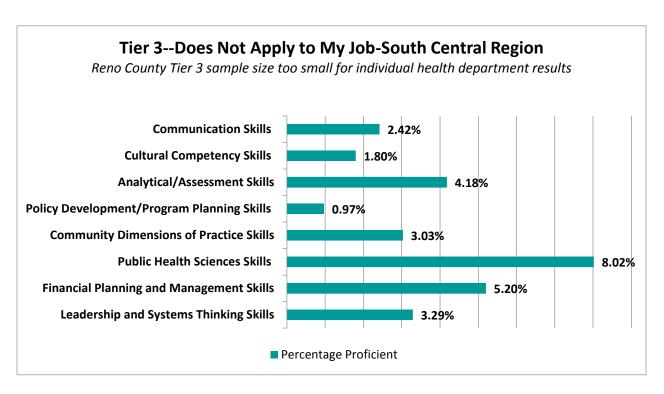












		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Participate in the development of demographic, statistical, programmatic and scientific presentations	50.00%
Competency with highest level of proficiency	Solicit community-based input from individuals and organizations	83.33%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Participate in the development of demographic, statistical, programmatic and scientific presentations	60.00%

Tier 1— Cultural Competency		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Describe the need for a diverse public health workforce	50.00%
Competency with highest level of proficiency	Participate in the assessment of the cultural competence of the public health organization	100.00%
		Percentage of
		total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Participate in the assessment of the cultural competence of the public health organization	70.00%

Tier 1— Analytical/Assessment

		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Use methods and instruments for collecting valid and reliable qualitative and quantitative data	40.00%
Competency with highest level of proficiency	Recognize the integrity and comparability of data Adhere to ethical principles in the collection, maintenance, use, and dissemination of data and information Use variables that measure public health conditions Describe the characteristics of a population-based health problem	100.00%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Describe the characteristics of a population-based health problem	80.00%

Tier 1— Policy Development/Program Planning		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Describe the public health/ environmental laws and regulations governing public health programs	60.00%
Competency with highest level of proficiency	Gather information relevant to specific public health/environmental policy issues	100.00%

	Describe how policy options can influence public health programs	
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Describe how policy options can influence public health programs	70.00%

Tier 1— Community Dimensions of Practice		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Use group processes to advance community involvement	75.00%
Competency with highest level of proficiency	Demonstrate the capacity to work in community-based participatory research efforts	100.00%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Demonstrate the capacity to work in community-based participatory research efforts	80.00%

Tier 1— Public Health Sciences		
		Percentage of respondents who reported any level of proficiency
Competency with lowest	Identify prominent events in the	100.00%
level of proficiency	history of the public health profession	
Competency with highest	Retrieve scientific evidence from a	57.14%
level of proficiency	variety of text and electronic sources	
		Percentage of

		total respondents
Competency with highest	Identify prominent events in the	60.00%
percentage of participants	history of the public health profession	
reporting that it does not		
apply to their job		

Tier 1— Financial Planning and Management		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Demonstrate public health informatics skills to improve program and business operations Contribute to the preparation of proposals for funding from external sources	66.67%
Competency with highest level of proficiency	Operate programs within current and forecasted budget constraints Identify strategies for determining budget priorities based on federal, state, and local financial contributions	100.00% Percentage of
		total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Participate in the development of contracts and other agreements for the provision of services Describe how cost-effectiveness, costbenefit, and cost-utility analyses affect programmatic prioritization and	80.00%
apply to their job	·	

Tier 1— Leadership and Systems Thinking

		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Describe the impact of changes in the public health system, and larger social, political, economic environment on organizational practices	80.00%
Competency with highest level of proficiency	Use individual, team and organizational learning opportunities for personal and professional development	87.50%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Participate with stakeholders in identifying key public health values and a shared public health vision as guiding principles for community action	70.00%

Tier 2— Communication Skills		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Assess the health literacy of the population served	44.44%
Competency with highest level of proficiency	Solicit input from individuals and organizations	100.00%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not	Assess the health literacy of the population served	18.18%
apply to their job	Apply communication and group dynamic strategies in interactions with individuals and groups	

Tier 2— Cultural Competency		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Incorporate strategies for interacting with persons from diverse backgrounds	30.00%
Competency with highest level of proficiency	Describe the need for a diverse public health workforce	100.00%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Explain the dynamic forces that contribute to cultural diversity	10.00%

Tier 2— Analytical/Assessment		
		Percentage of respondents who reported any level of proficiency
Competency with lowest	Describe the characteristics of a	22.22%
level of proficiency	population-based health problem	
	Generate variables that measure public health conditions Identify gaps in data sources	
Competency with highest	Reference sources of public health	100.00%
level of proficiency	data and information	
	Assess the health status of populations and their related causes of health and illness	

		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Assess the health status of populations and their related causes of health and illness	27.27%

Tier 2— Policy Development/Program Planning			
		Percentage of respondents who reported any level of proficiency	
Competency with lowest level of proficiency	Analyze policy options for public health programs Incorporate public health informatics practices	25.00%	
Competency with highest level of proficiency	Describe the implications of policy options Use decision analysis for policy development and program planning Develop policies for organizational plans, structures, and programs	90.00%	
		Percentage of total respondents	
Competency with highest percentage of participants reporting that it does not apply to their job	Determine the feasibility and expected outcomes of policy options Incorporate public health informatics practices Analyze policy options for public health programs	27.27%	

Tier 2— Community Dimensions of Practice

		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Distinguish the role of governmental and non-governmental organizations in the delivery of community health services	25.00%
Competency with highest level of proficiency	Promote public health policies, programs and resources Use group processes to advance community involvement Assess community linkages and relationships among multiple factors	100.00%
	(or causes) affecting health Collaborate in community-based participatory research efforts	Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Assess community linkages and relationships among multiple factors (or causes) affecting health Collaborate in community-based participatory research efforts Establish partnerships with key stakeholders Facilitate collaboration and partnerships to ensure participation of key stakeholders Maintain partnerships with key stakeholders	27.27%

Tier 2— Public Health Sciences

		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Distinguish prominent events in the history of the public health profession	63.64%
Competency with highest level of proficiency	Apply the Ten Essential Services of Public Health in my day to day work	63.64%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Determine the laws, regulations, policies and procedures for the ethical conduct of research	9.09%

Tier 2— Financial Planning and Management		
		Percentage of respondents who reported any level of proficiency
Competency with lowest	Negotiate contracts and other	50.00%
level of proficiency	agreements for the provision of	
	services	
Competency with highest level of proficiency	Evaluate program performance	100.00%
		Percentage of
		total respondents
Competency with highest	Prepare proposals for funding from	45.45%
percentage of participants	external sources	
reporting that it does not		
apply to their job	Negotiate contracts and other	
	agreements for the provision of	
	services	

Tier 2— Leadership and Systems Thinking		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Participate with stakeholders in identifying key values and a shared vision as guiding principles for community action	33.33%
Competency with highest level of proficiency	Promote individual, team and organizational learning opportunities Contribute to the measuring, reporting and continuous improvement of organizational performance	100.00%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Establish mentoring, peer advising, coaching or other personal development opportunities for the public health workforce	20.00%

Note: The sample size for Tier 3 was too small to report Reno County results. The results reported are for the South Central region.

Tier 3— Communication Skills		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Interpret demographic, statistical, programmatic, and scientific information for use by professional and lay audiences	34.78%
Competency with highest	Ensure a variety of approaches are	91.30%

level of proficiency	considered and used to disseminate public health information	
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Ensure that the health literacy of populations served is considered throughout all communication strategies	4.35%

Tier 3— Cultural Competency		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Assess the dynamic forces that contribute to cultural diversity	43.48%
Competency with highest level of proficiency	Ensure the consideration of the role of cultural, social, and behavioral factors in the delivery of public health services	70.83%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Assess the public health organization for its cultural competence	4.35%

Tier 3— Analytical/Assessment		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Resolve gaps in data sources	65.22%
Competency with highest level of proficiency	Identify the resources to meet community health needs	65.22%
		Percentage of

		total respondents
Competency with highest percentage of participants reporting that it does not apply to their job	Describe the characteristics of a population-based health problem	4.35%

Tier 3— Policy Development/Program Planning		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Oversee public health informatics practices and procedures	52.17%
Competency with highest level of proficiency	Determine policy for the public health organization with guidance from the organization's governing body	75.00%
		Percentage of total respondents
Competency with highest percentage of participants reporting that it does not	Determine policy options for public health organization	4.17%
apply to their job	Integrate emerging trends of the fiscal, social and political environment into public health strategic planning	
	Oversee public health informatics practices and procedures	

Tier 3— Community Dimensions of Practice		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Encourage community-based participatory research efforts within the public health organization	69.57%

Competency with highest	Maintain partnerships with key	79.17%
level of proficiency	stakeholders	
		Percentage of
		total respondents
Competency with highest	Integrate the role of governmental and	8.33%
percentage of participants	non-governmental organizations in the	
reporting that it does not	delivery of community health services	
apply to their job		

Tier 3— Public Health Sciences			
		Percentage of respondents who reported any level of proficiency	
Competency with lowest level of proficiency	Advise on the laws, regulations, policies and procedures for the ethical conduct of research	80.95%	
Competency with highest level of proficiency	Apply the basic public health sciences (e.g. epidemiology, environmental etc.) to public health policies and programs	65.22%	
		Percentage of total respondents	
Competency with highest percentage of participants reporting that it does not apply to their job	Critique the scientific foundation of the field of public health	13.04%	

Tier 3— Financial Planning and Management		
		Percentage of respondents who reported any level of proficiency
Competency with lowest level of proficiency	Manage the implementation of the judicial and operational procedures of the administrative unit that oversees	61.90%

	the operations of the public health organization	
Competency with highest	Apply basic human relations skills to	87.50%
level of proficiency	the management of organizations,	
•	motivation of personnel, and	
	resolution of conflicts	
	Tesolation of commets	Percentage of
		_
		total respondents
Competency with highest	Manage the implementation of the	12.50%
percentage of participants	judicial and operational procedures of	
	the administrative unit that oversees	
reporting that it does not		
apply to their job	the operations of the public health	
	organization	
	Leverage the organizational structures,	
	functions, and authorities of local,	
	state, and federal public health	
	agencies for public health program	
	management	

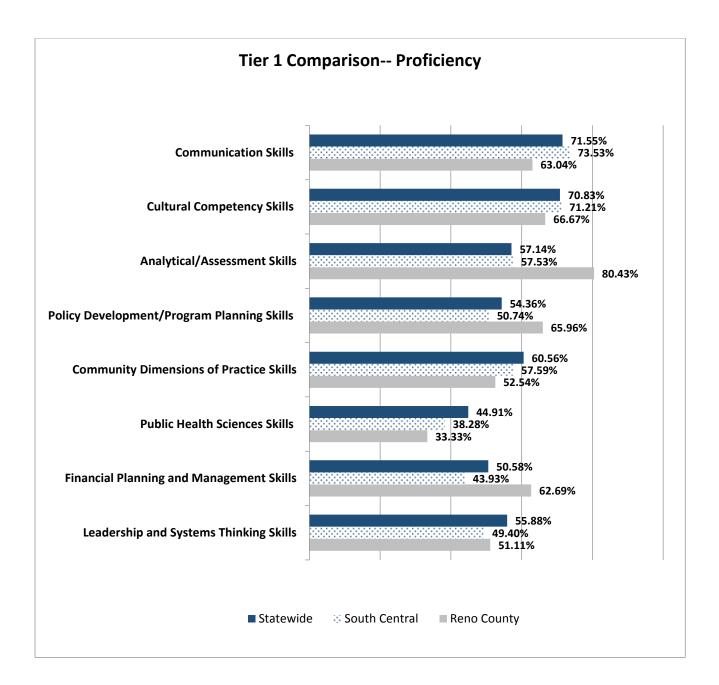
Tier 3— Leadership and Systems Thinking			
		Percentage of respondents who reported any level of proficiency	
Competency with lowest level of proficiency	Ensure organizational practices are in concert with changes in the public health system, and the larger social, political, and economic environment	50.00%	
Competency with highest level of proficiency	Incorporate ethical standards of practice as the basis of all interactions with organizations, communities, and individuals	87.50%	
		Percentage of total respondents	
Competency with highest percentage of participants reporting that it does not apply to their job	Partner with stakeholders to determine key values and a shared vision as guiding principles for community action	8.33%	

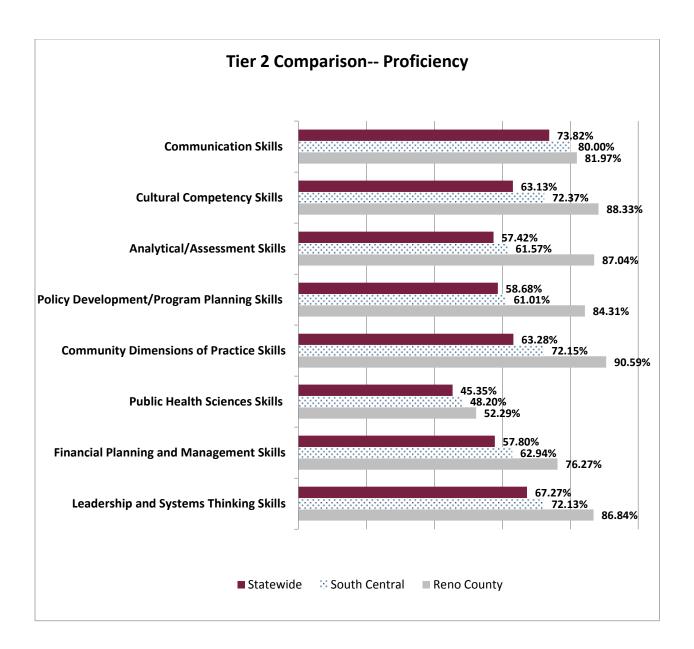
Ensure organizational practices are in concert with changes in the public health system, and the larger social,	
political, and economic environment	

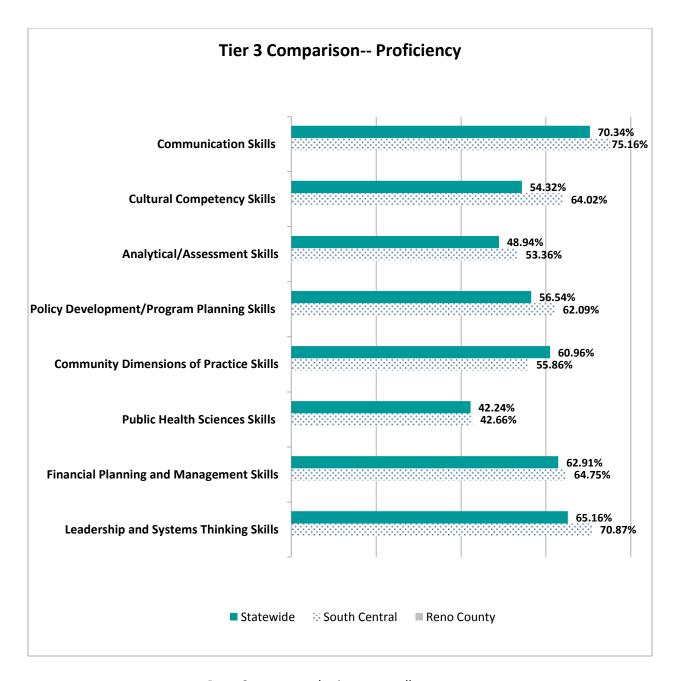
Tier A— Professional Skil	ls	
		Percentage of respondents who reported any level of proficiency
Competency with lowest	Participate in the measuring,	50.00%
level of proficiency	reporting and continuous	
	improvement of the organizational	
	through quality improvement	
Competency with highest	Use computers, computer programs	90.91%
level of proficiency	and other technologies to collect,	
	store, and retrieve data	
Overall Proficiency Percentag	ge for Professional Skills Domain	81.40%
Overall Percentage—Does No	ot Apply to My Job—Professional Skills	14.53%
Domain		
		Percentage of
		total respondents
Competency with highest	Participate in mentoring and peer	45.45%

percentage of participants reporting that it does not apply to their job	review or coaching opportunities	
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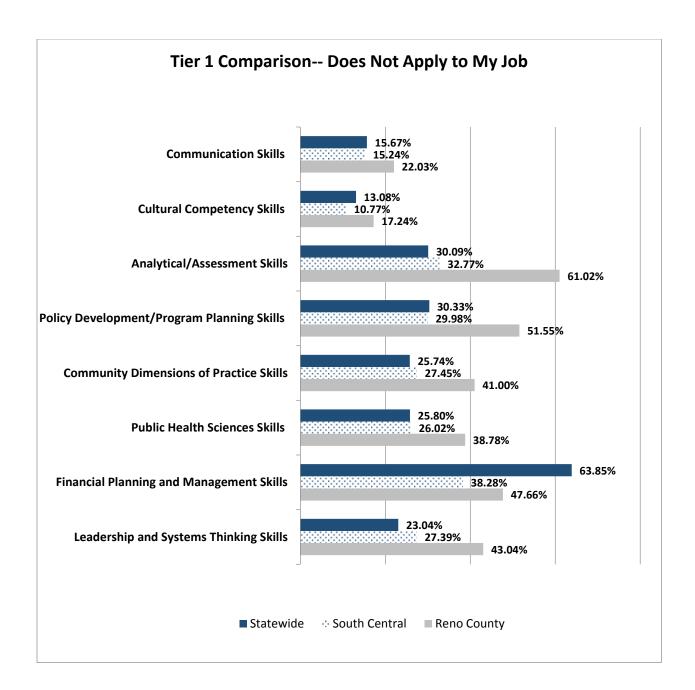
Tier A— Training/Education	
	Percentage Agree/Strongly Agree
At work, I have opportunities to learn and grow.	80.00%
Employees are continually developed through training, education, and opportunities for promotion.	87.50%
I have the skills I need to do my job.	100.00%
Training is implemented as part of an overall system of employee development.	87.50%
I am comfortable with technology-based training.	100.00%

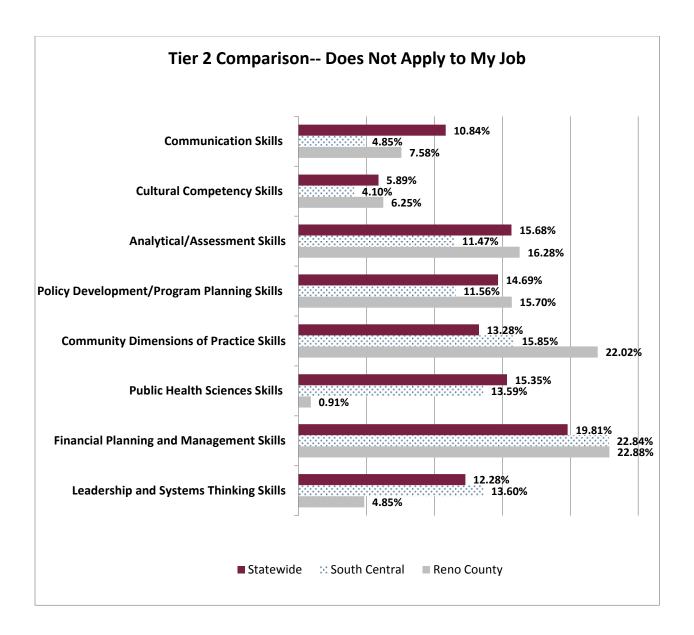


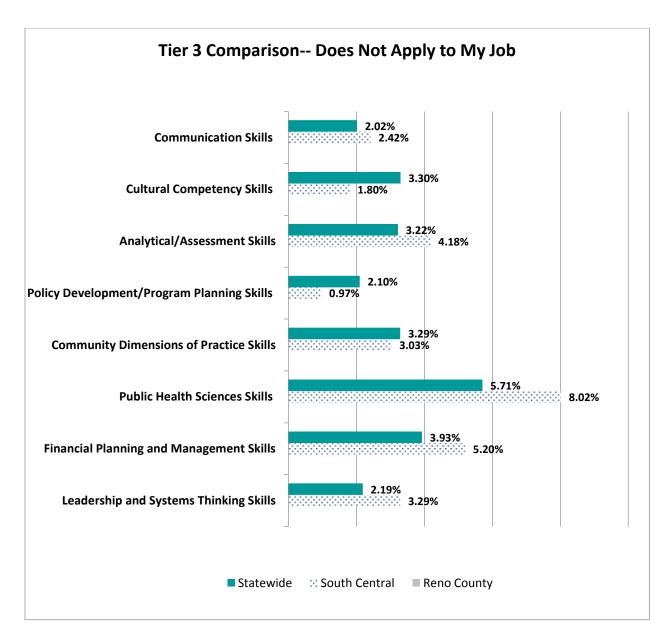




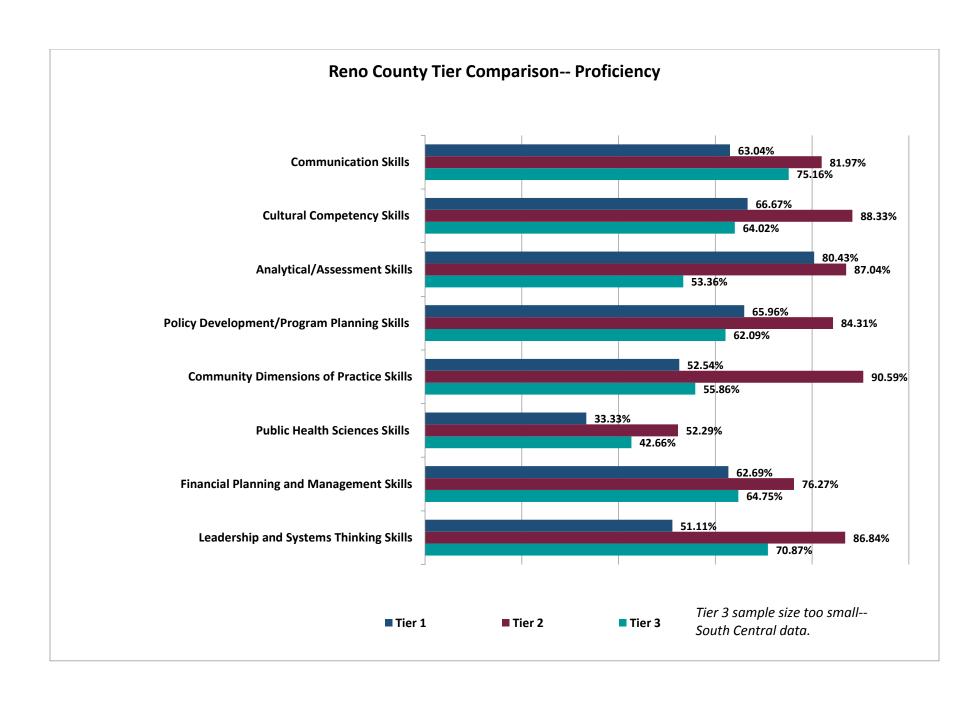
Reno County sample size too small to report.







Reno County sample size too small to report.



Appendix 1. Kansas Public Health Workforce Assessment Competencies At-A-Glance

Domain	Tier 1	Tier 2	Tier 3
Communications Skills	1.1. Identify the health literacy of the population served 1.2. Communicate in writing and orally, in person, and through electronic means, with cultural proficiency 1.3. Solicit community-based input from individuals and organizations 1.4. Convey public health/environmental information using a variety of approaches 1.5. Participate in the development of demographic, statistical, programmatic and scientific presentations 1.6. Apply communication and group dynamic strategies in interactions with individuals and groups	1.1. Assess the health literacy of the population served 1.2. Communicate in writing and orally, in person, and through electronic means, with cultural proficiency 1.3. Solicit input from individuals and organizations 1.4. Use a variety of approaches to disseminate public health/environmental information 1.5. Present demographic, statistical, programmatic, and scientific information for use by professional and lay audiences 1.6. Apply communication and group dynamic strategies in interactions with individuals and groups	1.1. Ensure that the health literacy of populations served is considered throughout all communication strategies 1.2. Communicate in writing and orally, in person, and through electronic means, with cultural proficiency 1.3. Ensure that the public health organization seeks input from other organizations and individuals 1.4. Ensure a variety of approaches are considered and used to disseminate public health information 1.5. Interpret demographic, statistical, programmatic, and scientific information for use by professional and lay audiences 1.6. Apply communication and group dynamic strategies in interactions with individuals and groups 1.7. Communicate the role of public health within the overall health system
Cultural Competency Skills	2.1. Incorporate strategies for interacting with persons from diverse backgrounds 2.2. Recognize the role of cultural, social, and behavioral factors in the accessibility, availability, acceptability and delivery of public health services 2.3. Respond to diverse needs that are the result of cultural differences	2.1. Incorporate strategies for interacting with persons from diverse backgrounds 2.2. Consider the role of cultural, social, and behavioral factors in the delivery of public health services 2.3. Respond to diverse needs that are the result of cultural differences 2.4. Explain the dynamic forces that contribute to cultural diversity	2.1. Ensure that there are strategies for interacting with persons from diverse backgrounds 2.2. Ensure the consideration of the role of cultural, social, and behavioral factors in the delivery of public health services 2.3. Respond to diverse needs that are the result of cultural differences

Domain	Tier 1	Tier 2	Tier 3
	2.4. Describe the dynamic forces that	2.5. Describe the need for a diverse	2.4. Assess the dynamic forces that
	contribute to cultural diversity	public health workforce	contribute to cultural diversity
	2.5. Describe the need for a diverse	2.6. Assess public health programs for	2.5. Assess the need for a diverse
	public health workforce	their cultural competence	public health workforce
	2.6. Participate in the assessment of		2.6. Assess the public health
	the cultural competence of the public		organization for its cultural
	health organization		competence
			2.7. Ensure the public health
			organization's cultural competence
Analytical and	3.1 Identify the health status of	3.1 Assess the health status of	3.1. Review the health status of
Assessment Skills	populations and their related	populations and their related causes of	populations and their related causes of
Assessificit Skills	determinants of health and illness	health and illness	health and illness
	3.2 Describe the characteristics of a	3.2. Describe the characteristics of a	3.2. Describe the characteristics of a
	population-based health problem	population-based health problem	population-based health problem
	3.3 Use variables that measure public	3.3. Generate variables that measure	3.3. Evaluate variables that measure
	health conditions	public health conditions	public health conditions
	3.4 Use methods and instruments for	3.4. Use methods and instruments for	3.4. Critique methods and instruments
	collecting valid and reliable qualitative	collecting valid and reliable qualitative	for collecting valid and reliable
	and quantitative data	and quantitative data	quantitative and qualitative data
	3.5 Identify sources of public health	3.5. Reference sources of public health	3.5. Expand access to public health data
	data and information	data and information	and information
	3.6 Recognize the integrity and	3.6. Examine the integrity and	3.6. Evaluate the integrity and
	comparability of data	comparability of data	comparability of data
	3.7 Identify gaps in data sources	3.7. Identify gaps in data sources	3.7. Resolve gaps in data sources
	3.8 Adhere to ethical principles in the	3.8. Employ ethical principles in the	3.8. Ensure the application of ethical
	collection, maintenance, use, and	collection, maintenance, use, and	principles in the collection,
	dissemination of data and information	dissemination of data and information	maintenance, use, and dissemination of
	3.9 Describe the public health	3.9. Interpret quantitative and qualitative	data and information
	applications of quantitative and	data	3.9. Integrate the findings from
	qualitative data	3.10. Make community-specific	quantitative and qualitative data into
	3.10 Collect quantitative and	inferences from quantitative and	organizational operations
	qualitative community data	qualitative data	3.10. Determine community specific
	3.11 Use information technology to	3.11. Use information technology to	trends from quantitative and

Domain	Tier 1	Tier 2	Tier 3
	collect, store, and retrieve data	collect, store, and retrieve data	qualitative data
	3.12 Describe how data are used to	3.12. Use data to address scientific,	3.11. Use information technology to
	address scientific, political, ethical, and	political, ethical, and social public health	collect, store, and retrieve data
	social public health issues	issues	3.12. Incorporate data into the
			resolution of scientific, political, ethical,
			and social public health concerns
			3.13 Identify the resources to meet
			community health needs
Policy	4.1 Gather information relevant to	4.1. Analyze information relevant to	4.1. Evaluate information relevant to
Development	specific public health/environmental	specific public health/environmental	specific public health/environmental
<u>-</u>	policy issues	policy issues	policy issues
and Program	4.2. Describe how policy options can	4.2. Analyze policy options for public	4.2. Determine policy options for public
Planning Skills	influence public health programs	health programs	health organization
	4.3. Explain the expected outcomes of	4.3. Determine the feasibility and	4.3. Critique the feasibility and
	policy options	expected outcomes of policy options	expected outcomes of various policy
	4.4. Gather information that will inform	4.4. Describe the implications of policy	options
	policy decisions	options	4.4. Critique selected policy options
	4.5. Describe the public	4.5. Use decision analysis for policy	using data and information
	health/environmental laws and	development and program planning	4.5. Determine policy for the public
	regulations governing public health	4.6. Manage public health/environmental	health organization with guidance from
	programs	programs consistent with public health	the organization's governing body
	4.6. Participate in program planning	laws and regulations	4.6. Critique decision analyses that
	processes	4.7. Develop plans to implement policies	result in policy development and
	4.7. Incorporate policies and	and programs	program planning
	procedures into program plans and	4.8. Develop policies for organizational	4.7. Ensure public health programs are
	structures	plans, structures, and programs	consistent with public health laws and
	4.8. Identify mechanisms to monitor	4.9. Develop mechanisms to monitor and	regulations
	and evaluate programs for their	evaluate programs for their effectiveness	4.8. Implement plans and programs
	effectiveness and quality	and quality	consistent with policies
	4.9. Demonstrate the use of public	4.10. Incorporate public health	4.9. Ensure the consistency of policy
	health informatics practices and	informatics practices	integration into organizational plans,
	procedures	4.11. Develop strategies for continuous	procedures, structures, and programs
	4.10. Apply strategies for continuous	quality improvement	4.10. Critique mechanisms to evaluate

Domain	Tier 1	Tier 2	Tier 3
	quality improvement		programs for their effectiveness and
			quality
			4.11. Oversee public health informatics
			practices and procedures
			4.12. Implement organizational and
			system-wide strategies for continuous
			quality improvement
			4.13. Integrate emerging trends of the
			fiscal, social and political environment
			into public health strategic planning
Community	5.1. Recognize community linkages and	5.1. Assess community linkages and	5.1. Evaluate the community linkages
Dimensions of	relationships among multiple factors	relationships among multiple factors (or	and relationships among multiple
	(or determinants) affecting health	causes) affecting health	factors (or causes) affecting health
Practice Skills	5.2. Demonstrate the capacity to work	5.2. Collaborate in community-based	5.2. Encourage community-based
	in community-based participatory	participatory research efforts	participatory research efforts within
	research efforts	5.3. Establish partnerships with key	the public health organization
	5.3. Identify stakeholders	stakeholders	5.3. Establish partnerships with key
	5.4. Collaborate with community	5.4. Facilitate collaboration and	stakeholders
	partners to promote the health of the	partnerships to ensure participation of	5.4. Ensure the collaboration and
	population	key stakeholders	partnerships of key stakeholders
	5.5. Maintain partnerships with key	5.5. Maintain partnerships with key	through the development of formal
	stakeholders	stakeholders	and informal agreements
	5.6. Use group processes to advance	5.6. Use group processes to advance	5.5. Maintain partnerships with key
	community involvement	community involvement	stakeholders
	5.7. Describe the role of governmental	5.7. Distinguish the role of governmental	5.6. Use group processes to advance
	and non-governmental organizations in	and non-governmental organizations in	community involvement
	the delivery of community health	the delivery of community health services	5.7. Integrate the role of governmental
	services	5.8. Negotiate for the use of community	and non-governmental organizations in
	5.8. Identify community assets and	assets and resources	the delivery of community health
	resources	5.9. Use community input when	services
	5.9. Gather input from the community	developing public health policies and	5.8. Negotiate for the use of
	to inform the development of public	programs	community assets and resources
	health policy and programs	5.10. Promote public health policies,	through MOUs and other formal and

Domain	Tier 1	Tier 2	Tier 3
	5.10. Inform the public about policies,	programs and resources	informal agreements
	programs, and resources		5.9. Ensure community input when
			developing public health policies and
			programs
			5.10. Defend public health policies,
			programs and resources
			5.11. Evaluate the effectiveness of
			community engagement strategies on
			public health policies, programs, and
			resources
Public Health	6.1. Describe the scientific foundation	6.1. Discuss the scientific foundation of	6.1. Critique the scientific foundation of
Science Skills	of the field of public health	the field of public health	the field of public health
Science Skins	6.2. Identify prominent events in the	6.2. Distinguish prominent events in the	6.2. Explain lessons to be learned from
	history of the public health profession	history of the public health profession	prominent past events in comparison
	6.3 Apply the Ten Essential Services of	6.3 Apply the Ten Essential Services of	to the current events of the public
	Public Health in my day to day work (go	Public Health in my day to day work (go	health profession
	to link for description:	to link for description:	6.3. Incorporate the Core Public Health
	http://www.cdc.gov/nceh/ehs/ephli/co	http://www.cdc.gov/nceh/ehs/ephli/core	Functions and Ten Essential Services of
	re_ess.htm)	_ess.htm)	Public Health into the practice of
	6.4. Relate public health science skills	6.4. Relate public health science skills to	the public health sciences (go to link for
	to the Core Public Health Functions and	the Core Public Health Functions and Ten	description:
	Ten Essential Services of Public Health	Essential Services of Public Health	http://www.cdc.gov/nceh/ehs/ephli/co
	6.5. Identify the basic public health	6.5. Apply the basic public health	re_ess.htm)
	sciences (epidemiology,	sciences (including, but not limited to	6.4. Apply the basic public health
	etc.)	biostatistics, epidemiology,	sciences (e.g. epidemiology,
	6.6. Describe the scientific evidence	environmental health sciences, health	environmental, etc.) to public health
	related to a public health issue,	services administration, and social and	policies and programs
	concern, or, intervention	behavioral health sciences) to public	6.5. Integrate a review of the scientific
	6.7. Retrieve scientific evidence from a	health policies and programs	evidence related to a public
	variety of text and electronic sources	6.6. Conduct a comprehensive review of	health/environmental issue, concern,
	6.8. Discuss the limitations of research	the scientific evidence related to a public	or, intervention into the practice of
	findings	health issue, concern, or intervention	public health
	6.9. Describe the laws, regulations,	6.7. Retrieve scientific evidence from a	6.6. Synthesize scientific evidence from

Domain	Tier 1	Tier 2	Tier 3
	policies and procedures for the ethical	variety of text and electronic sources	a variety of text and electronic sources
	conduct of research	6.8. Determine the limitations of research	6.7. Critique the limitations of research
	6.10. Partner with other public health	findings	findings
	professionals in building the scientific	6.9. Determine the laws, regulations,	6.8. Advise on the laws, regulations,
	base of public health	policies and procedures for the ethical	policies and procedures for the ethical
		conduct of research	conduct of research
		6.10. Contribute to building the scientific	6.9. Contribute to building the scientific
		base of public health	base of public health
			6.10. Establish partnerships with
			academic and other organizations to
			expand the public health science base
			and disseminate research findings
Financial	7.1. Describe the local, state, and	7.1. Interpret the interrelationships of	7.1. Leverage the interrelationships of
Planning and	federal public health and health care	local, state, and federal public health and	local, state, and federal public health
Management	systems	health care systems for public	and health care systems for public
_	7.2. Describe the organizational	health program management	health program management
Skills	structures, functions, and authorities of	7.2. Interpret the organizational	7.2. Leverage the organizational
	local, state, and federal public health	structures, functions, and authorities of	structures, functions, and authorities of
	agencies	local, state, and federal public health	local, state, and federal public health
	7.3. Adhere to the organization's	agencies for public health program	agencies for public health program
	policies and procedures	management	management
	7.4. Participate in the development of a	7.3. Develop partnerships with agencies	7.3. Manage partnerships with agencies
	programmatic budget	within the federal, state, and local levels	within the federal, state, and local
	7.5. Operate programs within current	of government that have authority over	levels of government that have
	and forecasted budget constraints	public health situations or with specific	authority over public health situations
	7.6. Identify strategies for determining	issues, such as emergency events	or with specific issues, such as
	budget priorities based on federal,	7.4. Implement the judicial and	emergency events
	state, and local financial contributions	operational procedures of the governing	7.4. Manage the implementation of the
	7.7. Report program performance	body and/or administrative unit that	judicial and operational procedures of the administrative unit that oversees
	7.8. Translate evaluation report	oversees the operations of the public	
	information into program performance improvement action steps	health organization 7.5. Develop a programmatic budget	the operations of the public health organization
	1 .		1 9
	7.9. Contribute to the preparation of	7.6. Manage programs within current and	7.5. Defend a programmatic and

Domain	Tier 1	Tier 2	Tier 3
Domain	proposals for funding from external sources 7.10. Apply basic human relations skills to internal collaborations, motivation of colleagues, and resolution of conflicts 7.11. Demonstrate public health informatics skills to improve program and business operations 7.12. Participate in the development of contracts and other agreements for the provision of services 7.13. Describe how cost-effectiveness, cost-benefit, and cost-utility analyses affect programmatic prioritization and decision making	forecasted budget constraints 7.7. Develop strategies for determining budget priorities based on federal, state, and local financial contributions 7.8. Evaluate program performance 7.9. Use evaluation results to improve performance 7.10. Prepare proposals for funding from external sources 7.11. Apply basic human relations skills to the management of organizations, motivation of personnel, and resolution of conflicts 7.12. Apply public health informatics skills to improve program and business operations 7.13. Negotiate contracts and other agreements for the provision of services 7.14. Use cost-effectiveness, cost-benefit, and cost-utility analyses in programmatic prioritization and decision making	organizational budget 7.6. Ensure that programs are managed within current and forecasted budget constraints 7.7. Critique strategies for determining budget priorities 7.8. Determine budgetary priorities for the organization 7.9. Evaluate program performance 7.10. Use evaluation results to improve performance 7.11. Approve proposals for funding from external sources 7.12. Apply basic human relations skills to the management of organizations, motivation of personnel, and resolution of conflicts 7.13. Integrate public health informatics skills into program and business operations 7.14. Approve contracts and other agreements for the provision of services 7.15. Include the use of cost-
		7.14. Use cost-effectiveness, cost-benefit, and cost-utility analyses in programmatic	informatics skills into program and business operations 7.14. Approve contracts and other agreements for the provision of services
			to improve organizational processes and performance 7.17. Establish a performance management system

Domain	Tier 1	Tier 2	Tier 3
Domain Leadership and Systems Thinking Skills	8.1. Incorporate ethical standards of practice as the basis of all interactions with organizations, communities, and individuals 8.2. Describe how public health operates within a larger system 8.3. Participate with stakeholders in identifying key public health values and a shared public health vision as guiding principles for community action 8.4. Identify internal and external problems that may affect the delivery of Essential Public Health Services 8.5. Use individual, team and organizational learning opportunities for personal and professional development 8.6. Participate in mentoring and peer review or coaching opportunities 8.7. Participate in the measuring, reporting and continuous improvement of organizational performance 8.8. Describe the impact of changes in	8.1. Incorporate ethical standards of practice as the basis of all interactions with organizations, communities, and individuals 8.2. Incorporate systems thinking into public health practice 8.3. Participate with stakeholders in identifying key values and a shared vision as guiding principles for community action 8.4. Analyze internal and external problems that may affect the delivery of Essential Public Health Services 8.5. Promote individual, team and organizational learning opportunities 8.6. Establish mentoring, peer advising, coaching or other personal development opportunities for the public health workforce 8.7. Contribute to the measuring, reporting and continuous improvement of organizational performance 8.8. Modify organizational practices in	8.1. Incorporate ethical standards of practice as the basis of all interactions with organizations, communities, and individuals 8.2. Integrate systems thinking into public health practice 8.3. Partner with stakeholders to determine key values and a shared vision as guiding principles for community action 8.4. Resolve internal and external problems that may affect the delivery of Essential Public Health Services 8.5. Advocate for individual, team and organizational learning opportunities within the organization 8.6. Promote mentoring, peer advising, coaching or other personal development opportunities for the public health workforce, including him or herself 8.7. Ensure the measuring, reporting and continuous improvement of
	problems that may affect the delivery of Essential Public Health Services 8.5. Use individual, team and organizational learning opportunities for personal and professional development 8.6. Participate in mentoring and peer review or coaching opportunities 8.7. Participate in the measuring, reporting and continuous improvement of organizational performance	problems that may affect the delivery of Essential Public Health Services 8.5. Promote individual, team and organizational learning opportunities 8.6. Establish mentoring, peer advising, coaching or other personal development opportunities for the public health workforce 8.7. Contribute to the measuring, reporting and continuous improvement of organizational performance	problems that may affect the delivery of Essential Public Health Services 8.5. Advocate for individual, team and organizational learning opportunities within the organization 8.6. Promote mentoring, peer advising, coaching or other personal development opportunities for the public health workforce, including him or herself 8.7. Ensure the measuring, reporting
	social, political, economic environment on organizational practices	health system, and the larger social, political, and economic environment	8.8. Ensure organizational practices are in concert with changes in the public health system, and the larger social, political, and economic environment 8.9. Ensure the management of organizational change

Domain	Tier A
Professional Skills	 Communicate effectively with people of different cultures and socio-economic backgrounds in writing, in person, and through electronic means Share public health information using a variety of methods Incorporate strategies for interacting with persons from diverse backgrounds Respond to diverse needs that are the result of cultural differences Act in an ethical manner in the collection, maintenance, use, and distribution of data and information Use computers, computer programs and other technologies to collect, store, and retrieve data Gather and compile information that can be used to inform policy decisions Participate in program planning Apply strategies for continuous quality improvement in routine work Maintain partnerships with key stakeholders Adhere to the organization's policies and procedures Operate within current and forecasted budget limitations Apply basic human relations skills (sensitivity, fairness, empathy, understanding, tact) to internal collaborations, motivation of colleagues, and resolution of conflicts Incorporate ethical standards of practice (such as with honesty, fairness, equality) as the basis of all interactions with organizations, communities, and individuals Describe the essential services of public health Use individual, team and organizational learning opportunities for personal and professional development Participate in mentoring and peer review or coaching opportunities Participate in the measuring, reporting and continuous improvement of the organizational through quality improvement

At work, I have opportunities to learn and grow. Individual differences across age, ethnicity, and working style are understood and managed well organization-wide. Employees are continually developed through training, education, and opportunities for promotion. My organization provides a variety of training opportunities for employees. I have the skills I need to do my job. I am allowed to take initiative to assess my skills and seek appropriate training. Training is structured to meet the needs of employees. Training is implemented as part of an overall system of employee development. I am comfortable with technology-based training.

Tier A—Core competencies apply to administrative and facilities support—Responsibilities of these professionals include front office duties, intake, billing, records management, personnel, facilities/maintenance and technical support/IT.

Tier 1--Core Competencies apply to public health professionals who carry out the day-to-day tasks of public health organizations and are not in management positions. Responsibilities of these public health professionals may include basic data collection and analysis, fieldwork, program planning, outreach activities, programmatic support, and other organizational tasks.

Tier 2--Core Competencies apply to individuals with program management and/or supervisory responsibilities. Responsibilities in addition to program/personnel management may include: program development, program implementation, program evaluation, establishing and maintaining community relations, managing timelines and work plans, presenting arguments and recommendations on policy issues etc.

Tier 3--Core Competencies apply to individuals at a senior/management level and leaders of public health organizations. These professionals typically have staff who report to them and may be responsible for the major programs or functions of an organization, setting a strategy and vision for the organization, and building an organization's culture.

Total Proficiency of Reno County Health Department Employees by Tier

	Communications	Assessment	Policy	Community	Organizational	All Hazards
			Development	Partnership	Competencies	Preparedness/Response
			and Support	Development		
Tier 1	64.86%	60.14%	49.65%	59.6%	56.9%	55.32%
Tier 2	85.15%	75.87%	68.28%	89.46%	81.56%	74.98%
Tier 3*	69.59%	53.35%	52.38%	59.94%	67.81%	56.26%

^{*}Tier 3 is regional data, sample size too small for RCHD

Total Proficiency Tier 1 Employees Reno County Health Department

	Communications	Assessment	Policy	Community	Organizational	All Hazards
			Development	Partnership	Competencies	Preparedness/Response
			and Support	Development		
Communication	63.04%					
Cultural Competency	66.67%	66.67%		66.67%		66.67%
Analytical/Assessment		80.43%				
Policy			65.96%			65.96%
Development/Program						
Planning						
Community				52.53%		
Dimensions of Practice						
Public Health Sciences		33.33%	33.33%			33.33%
Financial Planning and					62.69%	
Management						
Leadership Systems					51.11%	
and Thinking						
	64.86%	60.14%	49.65%	59.6%	56.9%	55.32%

Total Proficiency Tier 2 Employees Reno County Health Department

	Communications	Assessment	Policy	Community	Organizational	All Hazards
			Development	Partnership	Competencies	Preparedness/Response
			and Support	Development		
Communication	81.97%					
Cultural Competency	88.33%	88.33%		88.33%		88.33%
Analytical/Assessment		87.04%				
Policy			84.31%			84.31%
Development/Program						
Planning						
Community				90.59%		
Dimensions of Practice						
Public Health Sciences		52.29%	52.29%			52.29%
Financial Planning and					76.27%	
Management						
Leadership Systems					86.84%	
and Thinking						
	85.15%	75.87%	68.28%	89.46%	81.56%	74.98%

Total Proficiency Tier 3 Employees Southeast Region (RCHD sample too small)

	Communications	Assessment	Policy	Community	Organizational	All Hazards
			Development	Partnership	Competencies	Preparedness/Response
			and Support	Development		
Communication	75.16%					
Cultural Competency	64.02%	64.02%		64.02%		64.02%
Analytical/Assessment		53.36%				
Policy			62.09%			62.09%
Development/Program						
Planning						
Community				55.86%		
Dimensions of Practice						
Public Health Sciences		42.66%	42.66%			42.66%
Financial Planning and					64.75%	
Management						
Leadership Systems					70.87%	
and Thinking						
	69.59%	53.35%	52.38%	59.94%	67.81%	56.26%

	17-May	17-Jun	17-Jul	17-Aug	17-Sep	17-Oct	17-Nov	17-Dec	18-Jan	18-Feb	18-Mar	18-Apr	18-May	18-Jun	18-Jul	18-Aug	18-Sep	Oct-18
All Staff PM Training																		
All Staff Online PM Primer																		
All Staff Competency Training																		
Tier 3 Core Competencies Assessment																		
Tier 3 Analysis and Ranking																		
Tier 3 Training Plan																		
Tier 3 Job Descriptions Updated																		
Tier 2 Core Competencies Assessment																		
Tier 2 Analysis and Ranking																		
Tier 2 Training Plan																		
Tier 2 Job Descriptions Updated																		
Tier 1 Core Competencies Assessment																		
Tier 1 Analysis and Ranking																		
Tier 1 Training Plan																		
Tier 1 Job Descriptions Updated																		
Review and Revise Performance Review Tool		, and the second	, and the second			·	·		, and the second					·				
Annual Evaluations with compentenies																		

Tier 1 Staff Training Plan

Tier 1 Staff Training Plan				Assigend		
	Section Completion	Course Order		Course	Course is	
Section Names	Requirements	Requirements	Assigned Course Name	Formats	Required	Course ID
ES#1 : Monitor health status to identify and solve community health problems	Learner is required to take onlye one course out of this section of courses	Required courses can be taken in any order	Community Tool Box: Conducting Community Health Assessments and Community Health Improvement Curriculum, Module 1 (See training plan for Community Tool Box Series) KADEC: The Role of Professionals in Identifyiong and	Web-based training/self- study	Only one	1033673
			Intervening in the Lives of Drug Endangered Children Kansas Public Health Grant Rounds Fall 2012, "Top Health			1062217
			Issues in Kansas" archived webcast			1040873
ES#2: Diagnose and investigate health problems and health hazards in the community	Learner is required to take 'checked' courses only	Required courses can be taken in any order	Epidemiology in Practice Training Plan			
	Learner is required to		PH 101 Sercies from CDC: Intro to Epidemiology, Intro to PH Surveillance; Intro to PH Labratories; Intro to Prevention Effectiveness	Web-based training/self- study	2 of 4 are required	1059662; 1059516; 1059672; 1059675
ES#3: Inform, educate and empower people	take only one course out of this section of	Required courses can be taken in	Healthy Habits, Module 1: Obesity in Kansas Children, A	Web-based training/self-	2 of 3 are	
about health issues	courses	any order	Growing Epidemic (Series with 3 others available) Writing for the Public Healthy Homes 7 Basic Principles	study	required	1015996 1057714 1017952
ES#4: Mobilize community partnerships and	Learner is required to	Required courses can be taken in		Web-based training/self-		
action to identify and solve health problems	take all three	any order	Community Facilitator 101 Kansas Public Health Grand Rounds Fall 2013	study	3 of 3	1030875
	Learner is required to		"Communication Challenges and Successes in Public Health Messaging" archived webcast SNS Overview			1046556 1041004
ES#5: Develop policies and plans that support	take only two courses out of this section of	Into to QI taken		Web-based training/self-	2 of 3 are	
individual and community health efforts	courses	first	Heartland Centers: Quality Improvement Plans Building a Quality Improvement Culture	study	required	1025093 1035229
			Introduction to Quality Improvement in Public Health			1059234
ES#6: Enforce laws and regulations that protect health and ensure safety	Learner is required to take at least 3 courses	Required courses can be taken in any order	Practical Law for Public Health Officials	Web-based training/self- study	3 of 5 are required	1028438

		Cultural	Kansas Public Health Grand Rounds Fall 2013 "History of Public Health" archived webcast KDHE Bloodborne Pathogens HIPAA Awareness HIPAA: An Overview KDHE: Ebola and Other Infectious Diseases; Cleaning and Disinfecting Procedures		REQUIRED REQUIRED	1046537 106351 1047429 1041019
ES#7: Link People to Needed Personal Health Services: Cultural Competency	Learner is required to take at least 3 courses	Competency Module 1 taken first	Interpreting Basics: An Introduction to Healthcare and Social Services Interpreting WALD: Cultural Competency Module II WALD: Cultural Competency Module I	Web-based training/self- study	3 of 6 are required	1037207 1010197 1010194
			Module 1: Medical Home Model: What's all the fuss about? Module 1: Nursing Care Coordination: How it supports			1027644
			familites			1025049
			Health in 3-D: Diversity, Disparities, and Social Determinants			1063291
ES#8 : Assure a competent public and personal health care workforce	Learner is required to take 'checked' courses only	Required courses can be taken in any order	Packaging and Shipping Division 6.2 Materials: What the Laboratorian Should Know	Web-based training/self- study		1062513
			KHEL: Preparing Clinical Specimens Related to Chemical or Biological Exposure Using Evidence Control Measures			1050287
			KHEL: New Universal Sample Submission Form Overview Kansas Blood Lead Filter Paper Testing Training IS-700: Introduction to the National Incident Management			1047090 1009119
			System (NIMS)		REQUIRED	1016070
			IS-100: Introduction to the Incident Command System		REQUIRED	1002558
ES#9: Evaluate effectiveness, accessibility, and quality of person and population-based health services	Learner is required to take one course	Required courses can be taken in any order	Heartland Centers: Using Quality Improvement Tools to Advance Public Health Preparedness: The Kansas H1N1 Experience Heartland Centers: Quality Improvement Concepts Introduction to Performance Management	Web-based training/self- study	1 of 4 is required	1025064 1025091 1029493
			Kansas Public Health Grand Rounds: Quality Improvement Implementing Evidence-Based Practice archinved webcast			1053272

ES#10: Promote understanding and use of the current body of research results, evaluations and evidence based practices with appropriate audiences	d Learner is required to take one course	Required courses can be taken in any order	Kansas Public Health Grand Rounds: Population Health Stratification: Using National Data to Further Understand Grouped Health Behaviors Kansas Public Health Grand Rounds: Community Water Flouridation: One of the ten great public health achievements of the 20th century-lesseons learned from Wichita	Web-based training/self- study	1 is required	1042276 1050925
PHAB Domain 11: Maintain administrative and management capacity	Learner is required to take one course	Required courses can be taken in any order	Kansas Public Health Grand Rounds: Health Literacy Kansas: Advancing Health Literacy to Improve Outcomes While Lowering Costs for Kansas IT Security Awareness Training	Web-based training/self- study		1035396 1059437 1054439; 1054483; 1054567; 1054672;
PHAB Domain 12: Maintain capacity to engage the public health governing entity	Learner is reuired to take 3		Catalyst Trainings 1-5 Health Literacy for Health Professionals Training Plan Fundamentals of Kansas Public Health Module 1: Overview of the Kansas System		REQUIRED	1058612
			Community Tool Box Module 7: Developing an Intervention KPHA: An Orientation to Public Health in Kansas Orientation to Public Health (CDC PH 101)			1034994 1017215 1000614

Tier 2 Staff Training Plan

Section Names	Section Completion Requirements	Course Order Requirements	Assigned Course Name	Assigend Course Formats	Course is Required	Course ID
ES#1 : Monitor health status to identify and solve community health problems		Required courses can be taken in any order	Kansas Public Health Grand Rounds: Top Health Issues in Kansas archived webcast Community Toolbox Module 3: Conducting Community Health	web-based training/self-study		1040873
			Assessments Community Environmental Health Assessments Community Toolbox Module 2: Identifyiing Community Health			1033675
FC#2. Diagnosa and investigate health			Needs and Assets			1033674
ES#2: Diagnose and investigate health problems and health hazards in the			Kansas Public Health Grand Rounds" Got Data. Ideas and	web-based		
community	2 of 3 required		Lessons Learned in Gathering Internal Data An overview of outbreak investigations (FOCUS vol 1) Cause and effect in epidemiology Epidemiology in Practice Training Plan	training/self-study		
ES#3: Inform, educate and empower people about health issues	3 of 5 required		Healthy Habits, Module 1: Obesity in Kansas Children, A Growing Epidemic (Series with 3 others available) Kansas Public Health Grand Rounds: You are the key to HPV cencer prevention archived webcast Moving public health practice upstream: how public health can take on alcohol, tobacco and food	web-based training/self-study		1015996
			KDEM Training: Basic Public Information Officer Course	CLASSROOM		
ES#4: Mobilize community			KDHE: Ebola Risk Communications Training	CLASSROOM		1065100
partnerships and action to identify and		Required courses can		web-based		
solve health problems	2 of 3 required	be taken in any order	Community Facilitator 101 Training Kansas Public Health Grand Rounds "Commuication Challenges and Successes in Public Health Messaging" Community Toolbox Module 8: Assuring Collaboration During	training/self-study		1030875
			Implementation			1034996
ES#5: Develop policies and plans that						
support individual and community health efforts	2 of 4 required	Required courses can be taken in any order	Heartland Centers: Quality Improvement Plans Introduction to Quality Improvement in Public Health Best Practices in Program Planning for Local Pbesity Prevention	web-based training/self-study		1025093 1059243
			Heartland Centers: Critical Thinking for Public Health Practice Module 3			1024690
ES#6: Enforce laws and regulations that protect health and ensure safety	3 of 4 required	Required courses can be taken in any order	Kansas Public Health Grand Rounds "History of Public Health" archived webcast Practical Law for Public Health Officials			104537
			HIPAA: An Overview KDHE: Bloodborne Pathogen Training		REQUIRED REQUIRED	1041019 1068351

ES#7: Link People to Needed Personal Health Services: Cultural Competency	4 of 5 required	Required courses can be taken in any order	WALD: Cultural Competency Module II WALD: Cultural Competency Module I			1010197 1010194
			Module 1: Medical Home Model: What's all the fuss about?			1027644
			Module 1: Nursing Care Coordination: How it supports familites			1025049
			Health in 3-D: Diversity, Disparities, and Social Determinants			1063291
ES#8 : Assure a competent public and personal health care workforce			IS-700: Introduction to the National Incident Management System (NIMS) IS-100: Introduction to the Incident Command System		REQUIRED REQUIRED	1016070 1002558
			Packaging and Shipping Division 6.2 Materials: What the Laboratorian Should Know KHEL: Preparing Clinical Specimens Related to Chemical or	Web-based training/self-study		1062513
			Biological Exposure Using Evidence Control Measures			1050287
	1 of 3 from this section		KHEL: New Universal Sample Submission Form Overview Kansas Blood Lead Filter Paper Testing Training SNS Overview		REQUIRED	1047090 1009119
			Closed Point fo Dispensing Considerations: a SNS Perspective RSS Training Video Strategic National Stockpile			1004825 number
			ICS 300		REQUIRED	changes number
			ICS 400		REQUIRED	changes
ES#9: Evaluate effectiveness, accessibility, and quality of person and population-based health services	Learner is required to take two courses	Required courses can be taken in any order	Heartland Centers: Using Quality Improvement Tools to Advance Public Health Preparedness: The Kansas H1N1 Experience Heartland Centers: Quality Improvement Concepts Introduction to Performance Management	Web-based training/self-study	2of 4 are required	1025064 1025091 1029493
ES#10: Promote understanding and			Kansas Public Health Grand Rounds: Quality Improvement Implementing Evidence-Based Practice archinved webcast			1053272
use of the current body of research results, evaluations and evidence based practices with appropriate audiences			Kansas Public Health Grand Rounds "Population Health Stratification: Using National Data to Further Understand"	web-based training	g/self-study	
			Kansas Public Health Grand Rounds "Community Water Flouridation: One of the 10 great public health achievements"			

PHAB Domain 11: Maintain administrative and management capacity
PHAB Domain 12: Maintain capacity to engage the public health governing entity

Fundamentals of Kansas Public Health Module 4: Workforce		
Development		1063774
Kansas Evdience-Based Public Health: A course for state and		
local practitioners	CLASSROOM	1053556
KDHE: Kansas Evidence-Based Public Health Course: Online		
Modules	web-based training/self-study	1059934

Tier 3 Staff Training Plan

Section Names	Section Completion Requirements	Course Order Requirements	Assigned Course Name	Assigend Course Formats	Course is Required	Course ID
ES#1: Monitor health status to						
identify and solve community health problems	2 of 4 required	•	Kansas Public Health Grand Rounds: Top Health Issues in Kansas archived webcast	web-based training/self-study		1040873
nearth provients	2 01 1104404	be taken in any oraci	Community Toolbox Module 3: Conducting Community Health	a.ag, sea staay		10.0075
			Assessments			1033675
			Community Environmental Health Assessments			
			Community Toolbox Module 2: Identifyiing Community Health Needs and Assets			1033674
ES#2: Diagnose and investigate						
health problems and health hazards			Kansas Public Health Grand Rounds" Got Data. Ideas and	web-based		
in the community	2 of 3 required		Lessons Learned in Gathering Internal Data An everyious of outbreak investigations (FOCUS vol.1)	training/self-study		
			An overview of outbreak investigations (FOCUS vol 1) Cause and effect in epidemiology			
			Epidemiology in Practice Training Plan			
ES#3: Inform, educate and			Halli Halli Adal I a Ola ii taka a oli ila	.1.11		
empower people about health issues	3 of 5 required		Healthy Habits, Module 1: Obesity in Kansas Children, A Growing Epidemic (Series with 3 others available)	web-based training/self-study		1015996
133463	3 of 3 required		Kansas Public Health Grand Rounds: You are the key to HPV	truming/sem study		1013330
			cencer prevention archived webcast			
			Moving public health practice upstream: how public health can			
			take on alcohol, tobacco and food KDEM Training: Basic Public Information Officer Course	CLASSROOM		
			KDHE: Ebola Risk Communications Training	CLASSROOM		1065100
ES#4: Mobilize community						
partnerships and action to identify		Required courses can		web-based		
and solve health problems	3 of 6 required	be taken in any order	Community Facilitator 101 Training	training/self-study		1030875
			Kansas Public Health Grand Rounds "Commuication Challenges			
			and Successes in Public Health Messaging" Community Toolbox Module 8: Assuring Collaboration During			
			Implementation			1034996
			Kansas Public Health Grand Rounds " Kansas PBRN" archived			
			webcast Kansas Local Public Health Leadership Series	CLASSROOM		1057292 1045444
			Community Toolbox Module 4: Setting Community Priorities	CLASSICOTVI		1043444
			Based on Identified Issues			1034102
ES#5: Develop policies and plans		Danish danish				
that support individual and community health efforts	4 of 7 required	Required courses can be taken in any order	Heartland Centers: Quality Improvement Plans	web-based training/self-study		1025093
community meaner error to	. o equilica	se taken in any oraci	Introduction to Quality Improvement in Public Health	aranimigy sent stady		1059243
			Best Practices in Program Planning for Local Phesity Prevention			
			Heartland Centers: Critical Thinking for Public Health Practice			
			Module 3			1024690
			Program Evaluation in Public Health			

ES46: Enforce laws and regulations			Community Toolbox Module 6: Developing a Strategic Plan for Community Health Improvement Community Toolbox Module 5: Developing a Logic Model for Community Health Improvement			1034101 1034103
ES#6: Enforce laws and regulations that protect health and ensure safety	3 of 4 required	Required courses can be taken in any order	Practical Law for Public Health Officials		25025	104537
			HIPAA: An Overview KDHE: Bloodborne Pathogen Training		REQUIRED REQUIRED	1041019 1068351
ES#7: Link People to Needed			Ç Ç		•	
Personal Health Services: Cultural	4 - 4 5	Required courses can	MALD, College Commenter on Mandala II			1010107
Competency	4 of 5 required	be taken in any order	WALD: Cultural Competency Module II WALD: Cultural Competency Module I			1010197 1010194
			Wiles. Cultural Competency Module 1			1010134
			Module 1: Medical Home Model: What's all the fuss about?			1027644
			Module 1: Nursing Care Coordination: How it supports familites			1025049
			Health in 3-D: Diversity, Disparities, and Social Determinants			1063291
ES#8 : Assure a competent public and personal health care workforce			IS-700: Introduction to the National Incident Management System (NIMS)		REQUIRED	1016070
and personal meaning date mornioned			IS-100: Introduction to the Incident Command System		REQUIRED	1002558
			Packaging and Shipping Division 6.2 Materials: What the Laboratorian Should Know KHEL: Preparing Clinical Specimens Related to Chemical or	Web-based training/self-study		1062513
			Biological Exposure Using Evidence Control Measures			1050287
			KHEL: New Universal Sample Submission Form Overview Kansas Blood Lead Filter Paper Testing Training			1047090 1009119
	1 of 3 from this section		SNS Overview		REQUIRED	
			Closed Point fo Dispensing Considerations: a SNS Perspective RSS Training Video Strategic National Stockpile			1004825
			ICS 300		REQUIRED	number changes
ES#9: Evaluate effectiveness,			ICS 400		REQUIRED	number changes
accessibility, and quality of person and population-based health services	Learner is required to take two courses	Required courses can be taken in any order	Heartland Centers: Using Quality Improvement Tools to Advance Public Health Preparedness: The Kansas H1N1 Experience Heartland Centers: Quality Improvement Concepts Introduction to Performance Management	Web-based training/self-study	2of 4 are required	1025064 1025091 1029493
			Kansas Public Health Grand Rounds: Quality Improvement Implementing Evidence-Based Practice archinved webcast			1053272

FC#4.0. Doznacka za doznaka dia a a a a	1				
ES#10: Promote understanding and use of the current body of research					
results, evaluations and evidence	·				
based practices with appropriate	Learner is required to take		Kansas Public Health Grand Rounds "Population Health	web-based	
audiences	three courses		Stratification: Using National Data to Further Understand"	training/self-study	
			Kansas Public Health Grand Rounds "Community Water		
			Flouridation: One of the 10 great public health achievements"		
			Fundamentals of Kansas Public Health Module 4: Workforce		
			Development		1063774
			Kansas Evdience-Based Public Health: A course for state and		
			local practitioners	CLASSROOM	1053556
			KDHE: Kansas Evidence-Based Public Health Course: Online	web-based	
DUAD Damain 44. Maintain			Modules	training/self-study	1059934
PHAB Domain 11: Maintain administrative and management		Required courses can	Kansas Public Health Grand Rounds "Advancing Health Literacy		
capacity	7 of 13 are required	be taken in any order	to Improve Outcomes"		
			Fundamentals of Kansas Public Health Module 3: Financial		
			Management and Preparedness		1063773
			IT Secutiry Awareness Training		1059437
			Public Health 101 Series: Introduction to PH Informatics		
			Barriers to the Ethical Practice of Public Health (module 7)		
			WSU HP570BC Care of Populations Badge, Financial Planning		
			and Management	WSU web-based	1061764
			Introduction to Local Health Department Billing and Business		
			Practices		1062321
			Heartland Centers Public Health Admin Series: Overall Aspects		
			of Managing an Agency Module 5		1024705
			Heartland Centers Public Health Admin Series: Grant Writing Module 2		1023071
			Heartland Centers Public Health Admin Series: Contracts		1023071
			Module 1		1023143
			Decision Making in Public Health Ethics, module 6		
			Health Literacy National Training Plan		
			Catalyst Aid to Local Grant Training Plan		
PHAB Domain 12: Maintain					
capacity to engage the public healt			Kansas Public Health Grand Rounds "Public Health Law 101)		
governing entity	4 of 6 are required		archived webcast		
			Community Toolbox Module 7: Developing an Intervention		1034994
			KPHA: An Orientation to Public Health in Kansas		1017215
			Fundamentals of Kansas Public Health Module 1: Overview of		1056344
			the Kansas System Fundamentals of Kansas Public Health Module 2: Governance		1056214
			and Policy		1063682
			Cultural Awareness: Introduction to Organizational Cultural		1003002
			Commenter of		

Competence